

# MORE HIPAA . . .

NORTH DAKOTA  
DEPARTMENT OF HEALTH

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## HIPAA Lingo

TPO—Treatment, Payment or Healthcare Operations

### TREATMENT

- Evaluations
- Group Therapy
- Counseling
- Case Management

### PAYMENT

- Billing
- Debt Collection
- Benefits/coverage determination—  
preauthorization
- Claims

### HEALTHCARE OPERATIONS

- Case management audits
- Quality assurance activities
- Licensing, accrediting surveyors/inspectors
- Professional competence reviews
- Student trainees/interns
- Grievance resolution
- Create de-identified information

### MINIMUM NECESSARY

Reasonable efforts to limit protected health information to that necessary to accomplish the intended purpose.

### COVERED ENTITY

People or organizations that have to follow HIPAA regulations.

### HYBRID ENTITY

Single legal covered entity whose business activities include both covered and non-covered functions.

### BUSINESS ASSOCIATE

A person or organization who performs a function or activity on behalf of the Department, or provides certain legal, financial or management services and the activities involve the use or disclosure of protected health information.

Privacy is what is to be kept confidential;  
security is how that information is protected.

### PHI—PROTECTED HEALTH INFORMATION

- Information that is a subset of health information, including demographic information collected from an individual, and
- Is created or received by a health care

provider, health plan, employer, or health care clearinghouse; and related to the past, present, or future physical or mental health or condition of an individual; the provision of health care to an individual; or the past, present, or

future payment for the provision of health care to an individual; and

- Identifies the individual; or

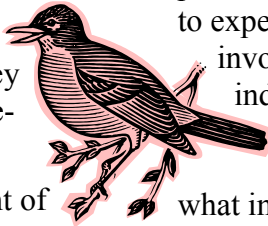
- With respect to which there is a reasonable basis to believe the information can be used to identify the individual.



## WORKFORCE

Employees, volunteers, trainees and other persons whose conduct, in the performance of work for the Department is under the direct control of the Department, whether or not they are paid by the Department.

Privacy is the right of an individual to be “left alone”. It includes freedom from intrusion or observation into one’s private affairs and the right



to maintain control over certain personal information. Individuals share personal information with healthcare providers and practitioners in the care process. They are entitled to expect that all of those involved respect the individual’s privacy. They have the right to control what information is available to various users and to limit re-disclosure of information.

Confidentiality is the responsibility for limiting disclosure of private matters and includes the responsibility to use, disclose or release such information with the knowledge and consent of the individual.

Security is the means to control access and PHI from accidental or intentional disclosure to unauthorized persons and from alteration, destruction or loss. HOW information is protected.

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## PUBLIC HEALTH

NDDoH is authorized to obtain and use individual information without the individual’s authorization for the purpose of preventing or controlling disease, injury or disability and for the conduct of public health surveillance, investigation and intervention. NDDoH may collect, use or disclose information without individual authorization to the extent that such collection, use or disclosure is required by law.

## HEALTH OVERSIGHT

HIPAA privacy rule provides that protected health information (phi) may be used and disclosed to health oversight agencies without the authorization of the individual for health oversight activities authorized by law. Examples are inspection, licensure and certification.

The health oversight agency must limit the uses and disclosure of phi to the minimum

necessary to accomplish the program’s regulatory purpose.

The surveyed entities do not need to execute a business associate agreement with the NDDoH.



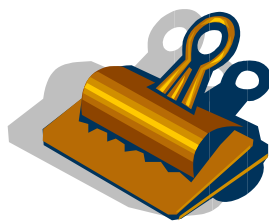
### CONFIDENTIALITY AND PRIVACY OF PATIENT INFORMATION

HIPAA was designed to protect and enhance the rights of healthcare consumers by providing them with access to their health information and in controlling the use of that information. One of the goals of the HIPAA privacy regulation is to have all associates evaluate and keep a constant awareness of how we utilize patient specific information in performing our daily tasks.

Did you know that the main reason for breaches in confidentiality in healthcare settings is loose talk and carelessness? Sometimes we go about our daily routines without giving conscious thought to how we work.

Have you witnessed, been a party to or participated in revealing information about an individual inappropriately? Think about the following:

- Do you talk about individual's protected health information with a co-worker where others may hear your conversation (i.e. in the elevator, your break room, in the stairwell, in the hallways)?



- Do you stay by the copy machine while copying and remember to take the original copy with you when you leave?

- Do you discuss individual's protected health information with friends or relatives?
- Do you retrieve faxes immediately so unauthorized people cannot access them?
- Do you e-mail information that contains individual identifiers?
- Do you listen to your voice mail on speaker instead of using the headset? If so, can anyone overhear the conversation?
- Is your computer screen turned so that it is not visible to the public?
- Do you log off your computer when you leave your desk so others cannot access public information utilizing your password?

### E-MAIL CONFIDENTIALITY NOTICE SAMPLE

If your outgoing e-mails contain protected health information, please include this statement:

Confidentiality Notice:

This e-mail message, including any attachment, is for the sole use of the intended recipient(s) and may contain confidential information. Any unauthorized review, use, disclosure or distribution is strictly prohibited. If you are not the intended recipient, please contact the sender, by e-mail, and destroy all copies of the original message.